

Claim Department Fax: 662 769 9801 E-mail: airasia_claim@tuneprotect.com

Policy No. Claim No.				
(This part must	be completed by insured) Tune Protect Travel - AirAsia: Claim Form			
Policy	Type of insurance plan purchased: One - Way Direct Plan Return Direct Plan Return Fly-Thru Plan Date of insurance purchased: One Way Fly-Thru Plan Return Fly-Thru Plan 			
	Passenger Name:			
Insured Person Details	Gender: Age: ID Card / Passport No.:			
	Address:	Postal Code:		
	Telephone No.: E-mail address:			
Flight Details	Booking No.(PNR):			
	Departing date: Airport:	to		
	Flight No.: Time:	to		
	Arriving date: Airport:	to		
	Flight No.: Time:	to		
Details of	Name: Age:			
Child (If claim	der: Birth Certificate No.:			
is for child)	(Please provide copy of the birth certificate)			
	RSONAL ACCIDENT (please select below) Accidental Death Total Permanent Disability Accidental Dismemberment			
FLI	GHT CANCELLATION			
TRIP CURTAILMENT (Return-Trip Plan apply only)				
ON	TIME GUARANTEE			
	LOSS OF BAGGAGE OR PERSONAL EFFECTS Description: Date & Place Purchased Original Cost 1)			
	GHT DELAY/COMMON CARRIER DELAY			



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Tune Protect Travel - AirAsia: Claim Form (Continued)					
			Amount Claimed		
MIS	SED FLIGHT CONNECTION				
BAGGAGE DELAY					
MEDICAL EXPENSE					
EMERGENCY MEDICAL EVACUATION & REPATRIATION					
LOS	S OF PERSONAL MONEY				
LOS	S OR DAMAGE TO TRAVEL DOCUMENT				
PERSONAL LEGAL LIABILITY					
	Date & Time of accident:				
	Place of accident/Country:				
	Please describe how accident occurred:				
Accident /					
Incident / Loss	Name and address of any witness:				
	Nature and extent of injuries:				
	Place of police report made:	Police Report No:			
L/Ma horoby	varrant that the above statements are true and correct and	that I / We have not withhold	from the Company any material		
-	onnection with this claim. I / We further authorize the relea				
	Photostat copy of this authorization shall be as effective ar				
(For officer only)					
		()			
		Signature of Insured Person or Legal Representative Date			
		NRIC/Passport No:			
		Relationship with Insured Person:			
		(If signed by Legal Representative)			
If the insured wa	ants to transfer to bank account:-		,		
Intern	ational transfer payment:-				
1) Name of account holder (claimant):		5) SWIFT Code:			
2) Account Number:		6) Currency:			
3) Bank name:		7) Your residence address:			
4) Bank address:					
Thailand transfer payment:-					
Account type: 🗖 Saving 🗖 Current Bank Name:		Bra	anch:		
Name of account holder (claimant):					
*** Please	*** Please attach a copy of book bank with certified the document ***				



Claim Supporting Documents Guide for Travel Insurance claims

Basic documents required (original):-

- 1) Completed Claim Form
- 3) Travel Itinerary

- 2) Air Ticket & Boarding Pass
- 4) Invoice (stating airfare and paid insurance premium)

Other documents (original unless stated) and information required for each of the following benefits of claim:-

- 1) Accidental Loss of Life/ Total Permanent Disability/ Dismemberment:-
 - 1.1) Death Certificate (Original or Certified True Copy)
 - 1.2) Police Report (Original or Certified True Copy)
 - 1.3) Insured Person's Identity Card and House Register with "Dead" stamp (Original or Certified True Copy)
 - 1.4) Insured Person's Passport or evidence of the journey (Original or Certified True Copy)
 - 1.5) Autopsy Report (Original or Certified True Copy)
 - 1.6) Beneficiary's Identity Card and House Register (Original or Certified True Copy)
 - 1.7) Report confirming such Total Permanent Disability or Dismemberment from doctor or physician

2) Flight Cancellation:-

- 2.1) Doctor/ Physician's report describing significant symptoms, diagnosis and result of treatment
- 2.2) Death Certificate
- 2.3) Letter from the commercial airline stating the amount charged by the airline
- 2.4) Birth Certificate, Marriage Certificate or other related documents to identify relationship in case caused from spouse, child or relatives

3) Trip Curtailment:-

- 3.1) Doctor/ Physician's report describing significant symptoms, diagnosis and result of treatment
- 3.2) Death Certificate
- 3.3) Letter from the commercial airline stating the amount charged by the airline
- 3.4) Birth Certificate, Marriage Certificate or other related documents to identify relationship in case caused from spouse, child or relatives
- 3.5) Copy of Receipt from AirAsia incurred from flight re-scheduling with boarding pass
- 3.6) Copy of Receipt from other airline from flight re-scheduling with boarding pass

4) On-Time Guarantee:-

- 4.1) Boarding Pass
- 4.2) Necessary documents required by the company

5) Baggage or Personal Effects:-

- 5.1) Property Irregularity Report issued by AirAsia (stating the Damage or Loss to Baggage/ Personal Effects)
- 5.2) Photos of Damage or Loss of Baggage/ Personal Effects
- 5.3) Quotation/ Receipt of Damage or Loss of Baggage/ Personal Effects
- 5.4) Baggage Tags
- 5.5) Local Police Report (Original or Certified True Copy), if the loss or damage occurs under threat or use of violence

6) Flight Delay/ Common Carrier Delay:-

- 6.1) Necessary documents required by the company
- 6.2) Written notice from the Common Carrier or agent confirming the date, reason for and length of the delay
- 7) Missed Flight Connection:-
 - 7.1) All air tickets and boarding passes of the connecting flight
 - 7.2) Necessary documents required by the company
- 8) Baggage Delay:-
 - 8.1) Baggage Tags
 - 8.2) Written documents or letter issued by AirAsia or carrier management (Irregularity Report)
- 9) Medical Expense:-
 - 9.1) Doctor/ Physician's report describing significant symptoms, diagnosis and result of treatment
 - 9.2) Original receipt with description of medical expenses or summary statement of medical expenses and receipt

10) Emergency Medical Evacuation & Repatriation

10.1) Contact Asia Assistance 24-Hours Hotline +662 - 203 - 9798



Claim Supporting Documents Guide for Travel Insurance claims

Other documents (original unless stated) and information required for each of the following benefits of claim:-

11) Loss of Personal Money:-

- 11.1) Claim forms prescribed by the Company
- 11.2) Copy of the Insured Person's passport or evidence of the journey
- 11.3) Copy of Local police report where applicable
- 11.4) Necessary documents required by the company

12) Loss or Damage to Travel Document:-

- 12.1) Claim forms prescribed by the Company
- 12.2) Copy of the Insured Person's passport or evidence of the journey
- 12.3) Local police report, if the loss or damage occurs under threat or use of violence
- 12.4) Original receipt with description of expenses or summary statement of expenses and receipt
- 12.5) Written documentation from the carrier management or hotel, if the loss or damage occurs while under the care and control
- of the carrier staff or hotel including copy of receipt of refund from carrier or hotel
- 12.6) Necessary documents required by the company

13) Personal Legal Liability:-

- 13.1) Claim forms prescribed by the Company
- 13.2) Copy of the Insured Person's passport or evidence of the journey
- 13.3) Copy of Local police report where applicable
- 13.4) Necessary documents required by the company